Name in Full Susan M. Berry

Certificate of Death

Died at Town Middletown Dist. County Charles MARYLAND

Date 1899 Month Feb. Day 4th Age Y. 80 M. D. Native of Md. Occupation Farmer

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ (Number of children living 12 Living - 5-0 grand children)

~~Husband~~ ~~Wife~~ of widow of Geo. H. Berry

Father's Name Samuel Sherriff Mother's Name Susan Payne

Cause of Death: Primary Age 72 How long sick

Immediate Pneumonia ~~Accident, Suicide, Homicide~~

Reported by L. H. Fowler, M.D. Accokeek,

Address Prince George Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Harry Jenkins

Died at Town: Hughesville County: Charles MARYLAND

Date 1899 Month: Feb Day: 12 Age Y. 4 M. Mo D. Native of Chas Co. Occupation —

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband ~~Wife~~ of

Father's Name Louis Jenkins

Mother's Name Olympia Burch

Cause of Death: Primary Broncho Pneumonia

Immediate

How long sick 5 days

~~Accident, Suicide, Homicide~~

71

Reported by H. C. Chappelear

Address Hughesville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full Harry Lambert

Certificate of Death

Died at Town Port Tobacco County Charles MARYLAND

Date 1899 Month 2 Day 21st Age Y. 28 M. D.

Native of

Occupation

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name 22a

Mother's Name Mrs. Geo. A. Wade

Cause of Death Primary Consumption

Immediate

How long sick 6 months

Accident, Suicide, Homicide

Reported by Marlboro Gazette

Address 3-1 pm

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Name in Full

Certificate of Death

Rebecca Elizabeth Lancaster.

Town: Wayside

County: Charles

Died at Wayside, Charles, MARYLAND

Date 1899 — Month: Feb. — Day: 8 — Age: Y. 3 M. 0 D. — Native of: England — Occupation:

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ / Widow / ~~Widower~~ — ~~Divorced~~ / ~~Number of children living~~

~~Husband~~ / Wife of J. F. Sn. Lancaster

Father's Name

Mother's Name

Cause of Death — Primary: 161

Immediate:

How long sick

~~Accident, Suicide, Homicide~~

Reported by Charles G. Cogley, Minister.

Address Wayside Charles Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Alfred Nally

Town

Near Bel Alton

County

Charles

MARYLAND

Died at

Month Day

Date 189 4 Feb.

Y. M. D.

Age 69 10 21

Native of

Occupation

Farmer

Male ~~Female~~

White ~~Colored~~

Married ~~Single~~

~~Widow~~ Widower

~~Divorced~~

Number of children living 3

Husband of Wife

Susanah E Nally

Father's Name

Thomas Nally

Mother's Name

Mary A Nally

Cause of Death

Primary Pneumonia 72

How long sick 7 days

Immediate Cardiac Failure

Accident, Suicide, Homicide

Reported by

E Spencer M.D.

Address

Bel Alton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Elizabeth C. Roby

Died at Town: Bel Alton | County: Charles | MARYLAND

Date 1899 | Month: Feb. | Day: 19 | Age: Y. 53 M. 7 D. 27 | Native of: Maryland | Occupation: Housekeeper

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 8

~~Husband~~ Wife of Peter W. Roby

Father's Name: John B Maddox | Mother's Name: Sarah Roby

Cause of Death: Primary: Tuberculosis Pul. | How long sick: 5 mo.

Immediate: Asthenia 22a | ~~Accident, Suicide, Homicide~~

Reported by: [illegible] M.D.

Address: Bel Alton Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Amanda Simmes

Died at Springhill (Town) Charles (County) MARYLAND

Date 1899 Month Feb. Day 12 | Age Y. 36. M. — D. | Native of Maryland | Occupation Home Keeper

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living 10

~~Husband~~ Wife of Oscar Simmes

Father's Name John Ford

Mother's Name Elizabeth Dyson

Cause of Death: Primary — Heart Trouble 5-7

Immediate — Dropsy

How long sick — 4 Months

~~Accident, Suicide, Homicide~~

Reported by Peter W. Roby Undertaker

Address Bel Allen M.d

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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